

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO.

10-680437

FILING DATE

APPLICANT(S)

AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS					
NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.	NO.	DEP.
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TOTAL NO.	3	3									
TOTAL DEP.	33	30									
TOTAL CLAIMS	36	30									

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TOTAL NO.					
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TOTAL CLAIMS					